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TRANSMITTAL FORM

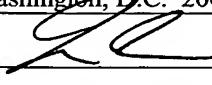
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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	10/717,441
		Filed Date	November 18, 2003
		First Named Inventor	Scott R. BANISTER, et al.
		Group Art Unit	Unknown
		Examiner Name	Unknown
Total Number of Pages in This Submission		Attorney Docket Number	002616-34

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers <i>(for an Application)</i> <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Declaration and Power of Attorney <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Application Data Sheet <input type="checkbox"/> Request for Corrected Filing Receipt with Enclosures <input type="checkbox"/> A self-addressed prepaid postcard for acknowledging receipt <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): 1. Request for Withdrawal as Attorney or Agent	
		Remarks <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 19-2380 for the above identified docket number.	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Marc S. Kaufman Registration No. 35,212 Nixon Peabody LLP 401 9 th Street, N.W., Suite 900 Washington, D.C. 20004-2128
Signature	
Date	1-17-06

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REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT	Application Number	10/717,441
	Filing Date:	November 18, 2003
	First Named Inventor	Scott R. BANISTER, et al.
	Art Unit	Unknown
	Examiner Name	Unknown
	Attorney Docket Number	002616-34

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Country	United States			
Telephone	(202) 944-3000		Fax	(202) 944-3068

This request is made on behalf of myself and

all the attorneys/agents of record.

the attorneys/agents (with registration numbers) listed on the attached paper(s), or

the attorneys/agents associated with Customer Number 22204

This request is enclosed in triplicate (including any attachments).

Name Marc S. Kaufman

Signature 

Date 1-17-06

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.